

Extended Care Services Copayment Calculations - Spousal Resource Protection Amount

Description

On November 27, 2013, the Department of Veterans Affairs (VA) published a final regulation, AO-59, that amended Title 38 Code of Federal Regulations (CFR) Section 17.111 (d)(2)(vi) and the definition for the spousal resource protection amount.

The spousal resource protection amount is now the value of liquid assets equal to the Maximum Community Spouse Resource Standard published by the Centers for Medicare and Medicaid Services (CMS) as of January 1 of the current calendar year if the spouse is residing in the community (not institutionalized). Prior to the regulations, the spousal resource protection amount had been a standard amount that was not adjusted.

Impact

For Veterans applying for extended care services on or after December 27, 2013, the spousal resource protection amount will increase from \$89,280 to \$115,920 for calendar year 2013 and then automatically adjust on an annual basis (as of January 1 of each calendar year) consistent with the comparable protection for the spouses of Medicaid recipients. The spousal resource protection amount will increase to \$117,240 as of January 1, 2014.

The regulatory change will impact Veterans who are required to complete VA Form 10-10EC, Application for Extended Care Services and who have a spouse residing in the community (not institutionalized). With the new threshold, Veterans will report less liquid assets and potentially lower the available resources used by VA for calculating the maximum monthly copayment obligation for extended care services longer than 180 days.

Veterans using extended care services, who have a spouse living in the community and who are required to make copayments should be encouraged to complete a new 10-10EC as a result of this change.

The 10-10EC should be updated at the following times:

- initial request for an episode of extended care services
- request for extended care services after a break in provision of extended care services for more than 30 days, or
- annually for a Veteran required to make copayments for extended care services and still in receipt of these services.

In addition, Veterans should report changes that could impact the copayment amount to their local VA health care facility within 10 days of the change. This includes:

- marital status
- fixed assets
- liquid assets
- expenses
- income (when received), or
- whether the Veteran has a spouse or dependents residing in the community.

Additional Information

Veterans can contact the Enrollment Coordinator at their nearest VA health care facility, by calling 1-877-222 VETS (8387) or visiting <http://www.va.gov/healthbenefits/>.

The current CMS maximum community spouse resource standard can be viewed at <http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Eligibility/Eligibility.html>.

The information for each calendar year will be included on the VA Copayments fact sheet which can be viewed at: <http://www.va.gov/healthbenefits/resources/publications.asp>.